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APPLICANTS

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** CONTINUING DATA

none my

** FOREIGN APPLICATIONS

*none my*IF REQUIRED, FOREIGN FILING LICENSE GRANTED *none my* ** SMALL ENTITY **
** 02/20/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 10	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 14
Verified and Acknowledged <i>[Signature]</i>	Examiner's Signature <i>[Signature]</i>	Initials			

ADDRESS

23873

TITLE

Mutations in a novel photoreceptor-pineal gene on 17P cause leber congenital amaurosis (LCA4)

FILING FEE RECEIVED 923	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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